

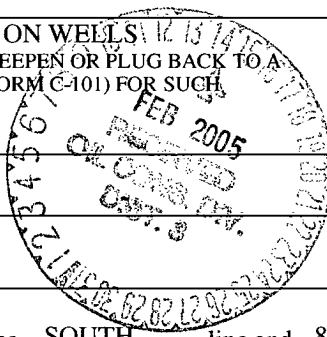
Sub: 3 Copies To Appropriate District
Offi
Distr
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-039-05464
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name JICARILLA BR A	
8. Well Number	4
9. OGRID Number	217817
10. Pool name or Wildcat SO. BLANCO PICTURED CLIFFS	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type WORKOVER Depth to Groundwater 0-50 Distance from nearest fresh water well >1000 Distance from nearest surface water 200-1000	
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume bbls; Construction Material	



SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator
CONOCOPHILLIPS CO.

3. Address of Operator P.O. BOX 2197 WL3 6108
HOUSTON, TX 77252

4. Well Location
Unit Letter I : 1550 feet from the SOUTH line and 840 feet from the EAST line
Section 15 Township 24N Range 5W NMPM County RIO ARRIBA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: PIT <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

ConocoPhillips requests approval to construct a workover pit for this well as per NMOCD guidelines. We anticipate closure as per the guidelines also.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE: Deborah Marberry TITLE: REGULATORY ANALYST DATE: 02/11/2005

Type or print name: DEBORAH MARBERRY
For State Use Only

E-mail address: deborah.marberry@conocophillips.com Telephone No. (832) 486-2326

APPROVED BY: Denny Fent TITLE: DEPUTY OIL & GAS INSPECTOR, DIST. 4 DATE: FEB 14 2005

Conditions of Approval (if any):